

93883

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re U.S. Patent Application

Applicant: John Anthony Dunne et al.

Serial No.: 10/527,273

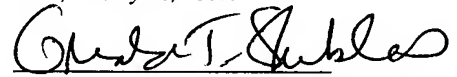
Filed: August 2, 2005

For: A SPOTLIGHT

) Art Unit: 2809

) Confirmation No.: 2333

) I hereby certify that this  
) correspondence is being  
) deposited with the United Postal  
) Service as first class mail in an  
) envelope addressed to:  
) Mailstop PCT / Commissioner  
for Patents / PO Box 1450 /  
Alexandria, Virginia 22313-  
1450, on July 16, 2007.

  
Gerald T. Shekleton Reg.  
No. 27,466

RESPONSE TO OFFICE ACTION OF JANUARY 23, 2007

Mail Stop PCT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Sir:

In response to the Office Action of January 23, 2007, in the above-identified patent application, enclosed please find:

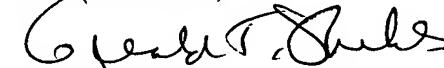
- ☒ Amendment
- ☒ Petition for Extension of Time 37 CFR 1.17(a)(1) [3 months]
- ☒ Fee Transmittal (in duplicate)
- ☒ Check in amount of \$1020.00 for fees
- ☒ Return postcard

Please charge any additional fees concerning this matter to our Deposit Account No. 23-0920.

07/20/2007. LLANDGRA 00000029 10527273

01 FC:2253 1020.00 DP

Respectfully submitted,  
WELSH & KATZ, LTD.

  
Gerald T. Shekleton  
Registration No. 27,466

Dated: July 16, 2007  
Welsh & Katz, Ltd.  
120 South Riverside Plaza, 22nd Floor  
Chicago, Illinois 60606  
Telephone: (312) 655-1500

Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2007

### Complete If Known

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$1020.00)

Application Number 10/527,273  
Filing Date August 2, 2005  
First Named Inventor John Anthony Dunne  
Examiner Name David R. Crowe  
Art Unit 2809  
Attorney Docket No. 2960/93883

### METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 23-0920 Deposit Account Name: Welsh & Katz, Ltd.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

### FEE CALCULATION

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| Application Type | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility          | 300         | 150                   | 500         | 250                   | 200              | 100                   |                |
| Design           | 200         | 100                   | 100         | 50                    | 130              | 65                    |                |
| Plant            | 200         | 100                   | 300         | 150                   | 160              | 80                    |                |
| Reissue          | 300         | 150                   | 500         | 250                   | 600              | 300                   |                |
| Provisional      | 200         | 100                   | 0           | 0                     | 0                | 0                     |                |

#### 2. EXCESS CLAIM FEES

| Fee Description   | Small Entity Fee (\$) | Fee (\$) |
|---|-----------------------|----------|
| Each claim over 20 (including Reissues)                               | 50                    | 25       |
| Each independent claim over 3 (including Reissues)                    | 200                   | 100      |
| Multiple dependent claims   | 360                   | 180      |
| <b>Total Claims</b>   |                       |          |
| - 20 or HP = _____ x _____ = _____                                    |                       |          |
| HP = highest number of total claims paid for, if greater than 20      |                       |          |
| <b>Indep. Claims</b>  |                       |          |
| - 3 or HP = _____ x _____ = _____                                     |                       |          |
| HP = highest number of independent claims paid for, if greater than 3 |                       |          |

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

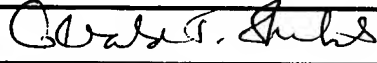
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  
- 100 = \_\_\_\_\_ /50= \_\_\_\_\_ (round up to a whole number) x \_\_\_\_\_ = \_\_\_\_\_

#### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Petition for Extension of Time [3 months] 1020.00

#### SUBMITTED BY

Signature  Registration No. 27.466 Telephone 312 655 1500  
(Attorney/Agent)  
Name (Print/Type) Gerald T. Shekleton Date July 16, 2007

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

AmericanLegalNet, Inc.  
www.FormsWorkflow.com

THIS DOCUMENT HAS A COLORED BACKGROUND, AN ULTRAVIOLET INK FEATURE AND A WATERMARK - HOLD UP TO A LIGHT TO VIEW.

WELSH & KATZ, LTD.

120 SOUTH RIVERSIDE PLAZA, 22ND FLOOR

CHICAGO, IL 60606

(312) 655-1500

THE NORTHERN TRUST COMPANY

CHICAGO, IL 60710

Payable Through

Northern Trust Bank / DuPage

Oakbrook Terrace, IL

70-2382

719

106002

DATE

07-16-2007

AMOUNT

\$1,020.00

\*\*\*ONE THOUSAND TWENTY AND 00/100 DOLLARS

PAY  
TO THE  
ORDER OF

COMMISSIONER OF PATENTS & TRADEMARKS

WELSH & KATZ, LTD.

*Gudat T. Pake*

WELSH & KATZ, LTD.

CHECK DATE: 07-16-2007

CHECK NO. 106002

| DATE   | INVOICE   | VOUCHER | DESCRIPTION    | NET      |       |            |
|--|-----------|---------|----------------|----------|-------|------------|
| 07-16-2007   | 071607-12 | 194513  | 296093883 - sd | 1,020.00 |       |            |
| VENDOR: COMMISSIONER OF PATENTS & TRADEMARKS REF # |           |         |                |          | TOTAL | \$1,020.00 |